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10/849691 Application Number **CHANGE OF** 5/19/2004 CORRESPONDENCE ADDRESS Filing Date Application Daniel Crandall First Named Inventor Art Unit Address to: Commissioner for Patents Examiner Name P.O. Box 1450 Alexandria, VA 22313-1450 GENF101.02 Attorney Docket Number Please change the Correspondence Address for the above-identified patent application to: The address associated with **/ Customer Number:** 25681 OR Firm or Individual Name Address State City Zip Country Telephone Email This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the: Applicant/Inventor Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Attorney or agent of record. Registration Number 45,685 Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number_ \$ignature Typed or Printed k H. McKinney Name Telephone₂₀₈₋₄₃₃₋₁₉₉₁, Ext. 205 Q NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. forms are submitted

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